

10/11/40

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

04-12-01

Attorney Docket No.	SP01-076	Total Pages	2
First Named Inventor or Applicant Identifier Ukrainczyk et al.			
Title Filament Housing for Fiber Splicing and Lens Fabrication Processes			
Express Mail Label No.	EL689102469US		

JC867

CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR 1.10:
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service 37 CFR 1.10 on the date indicated above and is Addressed to the Commissioner of Patents and Trademarks, Washington, DC 20231

Signature *Michelle N. O'Dell* 4/11/01

"EXPRESS MAIL" Mailing Label No. EL689102469US

ADDRESS TO:
Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

JC903 U.S. PTO
09/832668
4/11/01

1. <input checked="" type="checkbox"/> * Fee Transmittal Form (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
[Total Pages] 16	
<ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113)	7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. Oath or Declaration	8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)
[Total Sheets] 7	
[Total Pages] 2	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	9. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)	
13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	

ACCOMPANYING APPLICATION PARTS

7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)
9. <input type="checkbox"/> English Translation Document (if applicable)	10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/> Preliminary Amendment	12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)
13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	14. <input type="checkbox"/>

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: 08/

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 22928 or Correspondence address below

NAME	Angela N. Nwaneri				
ADDRESS	Corning Incorporated, SP-TI-3-1				
CITY	Corning	STATE	NY	ZIP CODE	14831
COUNTRY	USA	TELEPHONE	974-3455	FAX	(607) 974-3848
Name (Print/Type)	Angela N. Nwaneri			Registration No. (Attorney/Agent)	34,229
Signature	<i>Angela N. Nwaneri</i>			Date	4/11/01

.FEE TRANSMITTAL for FY 2001

		<i>Complete if Known</i>	
		Application Number	
		Filing Date	
		First Named Inventor	Ukrainczyk, Ljerka
		Examiner Name	
		Group / Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$1,014.00)	

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 03-3325

Deposit Account Name Corning Incorporated

Charge Any Additional Fees Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION
1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	101	710	Utility filing fee	<u>710.00</u>
	106	320	Design filing fee	
	107	490	Plant filing fee	
	108	710	Reissue filing fee	
	114	150	Provisional filing fee	
	SUBTOTAL (1)			(\$710.00)

2. EXTRA CLAIM FEES

		Extra Fee from Claims below	Fee Paid
Total Claims	28	- 20** = 8 x 18.00	= 144.00
Independent Claims	5	- 3** = 2 x 80.00	= 160.00

Multiple Dependent =

*or number previously paid, if greater; For Reissues, see below

Large Entity	Fee Code	Fee (\$)	Fee Description
	103	18	Claims in excess of 20
	102	80	Independent claims in excess of 3
	104	270	Multiple dependent claim, if not paid
	109	80	** Reissue independent claims over original patent
	110	18	** Reissue claims in excess of 20 and over original patent
	SUBTOTAL (2)		(\$304.00)

FEE CALCULATION (continued)
3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	105	130	Surcharge - late filing fee or oath	
	127	50	Surcharge - late provisional filing fee or cover sheet	
	139	130	Non-English specification	
	147	2,520	For filing a request for reexamination	
	112	920*	Requesting publication of SIR prior to Examiner action	
	113	1,840	Requesting publication of SIR after Examiner action	
	115	110	Extension for reply within first month	
	116	390	Extension for reply within second month	
	117	890	Extension for reply within third month	
	118	1,390	Extension for reply within fourth month	
	128	1,890	Extension for reply within fifth month	
	119	310	Notice of Appeal	
	120	310	Filing a brief in support of an appeal	
	121	270	Request for oral hearing	
	138	1,510	Petition to institute a public use proceeding	
	140	110	Petition to revive - unavoidable	
	141	1,240	Petition to revive - unintentional	
	142	1,240	Utility issue fee (or reissue)	
	143	440	Design issue fee	
	144	600	Plant issue fee	
	122	130	Petitions to the Commissioner	
	123	50	Petitions related to provisional applications	
	126	240	Submission of Information Disclosure Stmt	
	581	40	Recording each patent assignment per property (times number of properties) _____ x	
	146	710	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
	149	710	For each additional invention to be examined (37 C.F.R. § 1.129(b))	
	Other fee (specify) _____			
	Other fee (specify) _____			
	*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$)

SUBMITTED BY **Completed (if applicable)**

Name (Print/Type)	Angela N. Nwaneri	Registration No. (Attorney/Agent)	34,229
Signature		Date	4/11/01

Attorney Docket No. SP01-076
Filing Date: April _____, 2001